## **Application or Docket Number** PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 1997 **OTHER THAN CLAIMS AS FILED - PART I SMALL ENTITY SMALL ENTITY** TYPE OR (Column 2) (Column 1) NUMBER EXTRA NUMBER FILED RATE RATE **FOR** FEE FEE 395.00 790.00 **BASIC FEE** OR **TOTAL CLAIMS** x\$22= minus 20 = x\$11=OR INDEPENDENT CLAIMS minus 3 = x41 =x82 =OR MULTIPLE DEPENDENT CLAIM PRESENT +135= +270= OR If the difference in column 1 is less than zero, enter "0" in column 2 1.00 TOTAL TOTAL OR **CLAIMS AS AMENDED - PART II OTHER THAN** SMALL ENTITY (Column 3) **SMALL ENTITY** OR (Column 1) (Column 2) **CLAIMS HIGHEST** ADDI-ADDI-**PRESENT** REMAINING NUMBER RATE **TIONAL** RATE **TIONAL EXTRA** AFTER **PREVIOUSLY AMENDMENT** FEE FEE AMENDMENT PAID FOR x\$22= Total Minus x\$11=OR x82 =Independent Minus x41 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= OR +135= TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 3) (Column 2) (Column 1) CLAIMS **HIGHEST** ADDI-ADDI-REMAINING NUMBER PRESENT $\mathbf{\omega}$ TIONAL RATE **TIONAL** RATE **EXTRA AFTER PREVIOUSLY AMENDMENT** FEE FEE AMENDMENT PAID FOR x\$22=OR Minus x\$11=Total OR x82 =x41 =Independent Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR +270= +135= TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 3) (Column 2) (Column 1) **CLAIMS** HIGHEST ADDI-ADDI-**PRESENT** REMAINING NUMBER RATE TIONAL TIONAL RATE **EXTRA AFTER PREVIOUSLY AMENDMENT** FEE FEE AMENDMENT PAID FOR x\$11=OR x\$22=Minus Total x82 =OR x41 =Minus Independent FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR +270= +135= \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." \*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

## The Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: <u>19110316</u>

## Total Fee Calculation

	10tal rec Calculation									
	Fee Code	Total # Claims		Number Extra	X	Fee	Fee	= Tot	<u>si</u>	
. ÷	Sm./Lg.					Sm. Entity	Lg. Entity	ر. ان درصه	д	
Basic Filing Fee	201/101						170.	= 190.	_	
Total Claims >20	203/103		-20 =		X			=	_	
Independent Claims >3	202/102		-3 =		X			=		
Mult. Dep Claim Present	204/104							=	_	
Surcharge	205/105						130.00	= 130.00	_	
English Translation	139									
TOTAL FEE CALCUL	ATION							an.a	) —	
Fees due upon filing	the applica	tion:						• • •		
Total Filing Fees Du	ie =	s <u>990,00</u>			<del></del>		·			
Less Filing Fees Sul	bmitted -	s <u>/</u>			<del></del>					
BALANCE DUE	=	s 900.00								
Hae_			•							
Office of Initial Pat	ent Examin	ation								

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